DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION

031826.0007

COMPLETE IF KNOWN

LINDEN, Joel M.

Express Mail Cert. No. EV 316 334 985 US

Appric for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number

First Named Inventor

(3) CFR	.03)	Application Number						
with Initial Filing (surcha	Declaration	Filing Date						
	Submitted after Initial Filing (surcharge	Art Unit						
Filing (37 CFR 1.16 (e)) required)		Examiner Name						
As the below named inventor, I her	As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.								
I believe I am the original and first inv	entor of the subject matter wh	ich is claimed and for which	h a patent is sought on	the invention entitled:				
2-Amino-3-Aroyl-4, 5 Alkylthiophenes: Agonist Allosteric Enhancers at Human A1 Adenosine Receptors								
	(Title of the Inv	rention)						
the specification of which								
is attached hereto								
OR F								
was filed on (MM/DD/YYYY)		as United States A	oplication Number or Po	CT International				
<u> </u>								
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, underside information additional additional and the national or PCT international filing date of the continuation-in-part application.								
Thereby doing foreign priority handlis under 35.11.5.0. i10/a).//di or /fi. or 365/h) of any foreign application(e) for petent, inventor's or plant breader's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box any foreign application for national inventories.								
States of America, listed below and have also identified below, by checking the boy, any ferrian application for patent, inventor's or plant inventor's injuries certification, or any POT international application having a filling date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES NO				
			H I	H H I				
				一 一				
Prio ×	-			声 				
I A LEG LA CONTRACTOR	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02D autoures present							

PTO/SB/01 (10-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION I Hillity of Design Patent Anniloation					
Direct all correspondence to: Customer Number or Bar Code Label O22467 OR Correspondence address below					
Hillary W. Hawkins, Esq. Williams Mullen Name					
Two James Center					
Address 1021 East Cary Street					
Richmond		VA		23219	
City		State		ZIP	
USA 8	04.783.6493			804.783.6507	
Country Tele	phone			Fax	
I hereby declare that all statements made herein of my or are believed to be true; and further that these statement made are punishable by fine or improvement, as leath an validity of the application or any patent issued thereon.	TE MATER TOOKS MARK	h tha kn	contadas that willful false	. atatamanta and the 111-	
NAME OF SOLE OR FIRST INVENTOR:	A petition h	as bee	en filed for this unsig	ned inventor	
Given Name Joel M. (first and middle [if any])			LINDEN y Name mame		
Inventor's Signature				Date	
Charlottesville	VA		USA	USA	
Residence: City	State		Country	Citizenship	
207 Harvest Drive Mailing Address	•				
Charlottesville	VA		22903	USA	
City	State		ZIP	Country	
NAME OF SECOND INVENTOR:	A petition ha	s been	filed for this unsigne	ed inventor	
Given Name Ray A. (first and middle [if any]) Family Name or Surname					
Inventor's Ray A. Arssn. Signature Date Date					
Tampa	FL		USA	USA	
Residence: City	State		Country	Citizenship	
1126 Bayshore Boulevard, #1204 Mailing Address					
Tampa	FL	5	33629	USA	
City	State		ZIP	Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR	Attorney Docket Number	031826.0007			
DESIGN	First Named Inventor	LINDEN, Joel M.			
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number				
Declaration Declaration	Filing Date				
Submitted OR Submitted after Initial with Initial Filing (surcharge	Art Unit				
Filing (37 CFR 1.16 (e)) required)	Examiner Name				
As the below named inventor, I hereby declare that:	and the second of the second o				
My residence, mailing address, and citizenship are as stated below	v next to my name.				
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
2-Amino-3-Aroyl-4, 5 Alkylthiophenes: Agonist Allosteric Enhancers at Human A1 Adenosine Receptors					

(Title of the Invention	on)
the specification of which	
is attached hereto	
OR was filed on (MM/DD/YYYY)	as United States Application Number or PCT International
Application Number and was amended on	(MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

P	rior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	Attached?
	,					
			•			
	Additional foreign application nur	mbers are listed on a suppl	emental priority data sheet I	PTO/SB/02B attac	hed hereto:	

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: 19	spondence to: Customer Number or Bar Code Label 022467 OR Co		rrespondence address below			
Hillary W. Hawkins, Esq. Williams Mullen Name						
Two James Center			1			
Address 1021 East Cary Street						
Richmond		VA	_	23219		
City	·	State		ZIP		
USA	804.783.6493			804.783.6507		
Country Te	lephone			Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :	A petition h	as been	filed for this unsig	ned inventor		
Given Name Joel M. (first and middle [if any]) Given Name or Surname						
Inventor's Signature Date						
Charlottesville/	VA		USA	USA		
Residence: City / 207 Harvest Drive	State	9	Country	Citizenship		
•						
Mailing Address				11104		
Charlottesville	VA		22903	USA		
City	State		ZIP	Country		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Given Name Ray A. (first and middle [if any])		Family N				
Inventor's Signature				Date		
Tampa	FL		USA	USA		
Residence: City	State		Country	Citizenship		
1126 Bayshore Boulevard, #1204						
Malling Address						
1 8 2	FL		33629	USA .		
Tampa city	State		ZIP	Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

PTO/SB/02A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:					his unsigned inventor
Peter J. Given Name			SCAMMELLS Family Name or Surname		
Inventor's Signature			ι		4/6/02 Date
Victoria Residence: City	AUSTRALIA State Country			AUSTRALIAN Citizenship	
6 Harrington Avenue-North Balwyn Mailing Address					
Mailing Address					
city Victoria Melbourne	Victoria	- 31 Zi	104 IP	AUST Count	RALIA ry
Name of Additional Joint Inventor, if an	y:		A petition has been file	ed for th	is unsigned inventor
Given Name			amily Name r Surname		
Inventor's Signature					Date
Residence: City	State	C	ountry		Citizenship
Mailing Address					
Mailing Address					
City	State	2	ZIP	Count	ry
Name of Additional Joint Inventor, if any:					
Given Name			ily Name urname		
Inventor's Signature Date					Date
Residence: City	State		Country		Citizenship
Mailing Address					
Mailing Address					
City	State	. !	ZIP	C	ountry

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.